Application No.

CSI - DIOCESE OF MADRAS

Registration No.

C.S.I. EWART WOMEN'S CHRISTIAN COLLEGE

Melrosapuram (Via) Singaperumal Koil Kancheepuram District - 603 204

(Affiliated *to the University of Madras)*

Affix the Photo

Application Form for Admission to
B.Sc. - Computer Science / Microbiology / Mathematics / Home Science - Clinical Nutrition and Dietetics
B.Com(General) / B.Com ISM
B.A English

Please tick (√) wherever required

Course Applied for B.Sc. ☐ *B.Com.* ☐ *B.Com. ISM* ☐ *B.A.* ☐

Subject Applied for (Specify the Major) ……

Language opted for Part - I *For UG Courses* ……

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1. *Name (in Block Letters)* .....
2. *Date of Birth* .....
3. *Age* ..... *Marital Status: Married* ☐ *Unmarried* ☐
4. *Mother Tongue* .....
5. *Nationality* .....*State* .....
6. *Religion : Christian* ☐ *Hindu* ☐ *Muslim* ☐ *Others* ☐
   if C.S.I. Christian, Name of the Church …… *Place* ……
7. *Community : BC* ☐ *MBC* ☐ *OC* ☐ *SC* ☐ *ST* ☐ *Caste :* ……
8. *Blood Group* .....
9. *Identification Mark 1.* ……
   2. ……
10. *Father / Guardian Name* .....*Occupation*.....*Annual Income*.....
11. *Mother Name* ..... *Occupation*..... *Annual Income*.....
12. *If Physically Challenged Yes* ☐ *No* ☐
13. *Any Medical History*
    (Specify)……
14. *Are you a child of Ex-Service man of Tamil Nadu Origin: Yes* ☐ *No* ☐
15. *Name & Location of the School last studied* .....
    .....*EMIS No*.....

QUALIFYING EXAMINATION PASSED: ……..

SUBJECT	***MARKS***	***MAXIMUM***	***MONTH & YEAR OF PASSING***	***REG. NO.***	***NO. OF ATTEMPTS***
TOTAL			**PERCENTAGE**		

16. Permanent Address.....

District …… Pincode ……

17. Father's Mobile No ..... Mother's Mobile No .....

18. Email ID.....Father/Mother Email ID.....

19.

Bank Name& Branch	***Account No.***	***IFSC Code***	***Aadhar No.***

20.State whether Hostel accommodation is required: Yes ☐ *No* ☐

If yes , Local Guardian Mobile No:……..

Address……

……Pincode……..……..

21. Your Participation in Co-curricular Activities :

Sports & Games ☐ *NCC* ☐ *NSS* ☐ *Scouts* ☐ *Nil* ☐

UNDERTAKING

1. *I declare that the information furnished above is true to the best of my knowledge.*
2. *I agreed to abide by the rules and regulations of the C.S.I. Ewart Women's Christian College.*

Date :
Place :
** Name and address of Sponsoring Institution**
.....
** ONLY FOR SPONSOREDCANDIDATES**

PARENT /GUARDIANSIGNATURE *STUDENT SIGNATURE*